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APPLICANTS

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** CONTINUING DATA *****

None *ML*

** FOREIGN APPLICATIONS *****

None *ML*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 6	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>ML</i> Examiner's Signature Initials				

ADDRESS

44200
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TITLE

One handed, pop-up cargo management system

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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